

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: ILLINOIS

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902(r)(2) OF THE ACT

☒ Section 1902(f) State

☐ Non-Section 1902(f) State

1. Any resource necessary for self-support is exempted.
2. Resources derived under the provisions of the Illinois "Senior Citizens and Disabled Persons Property Tax Relief Act" are exempted.
3. Resources equal to the benefits paid by an Illinois Partnership Insurance Policy are disregarded. An Illinois Partnership Policy pays for:
 - * long term care services available under the Illinois Medicaid plan, including care in a licensed nursing facility, home health nursing and home health aid services provided by a licensed home health agency, and speech, occupational, and physical therapy and medical transportation,
 - * long term care services covered under the Medicaid home and community-based services waivers for the aged, the disabled, and HIV/AIDS victims,
 - * other alternate services which are deemed by the Illinois Department of Public Aid as essential to prevent institutionalization and offered by appropriately licensed or approved providers.

To qualify for the disregard the patient must score fifteen or more points on Part A of the Determination of Need and at least ten of which may be scored on the Mini-Mental State Exams.

Long term care facility services must be provided in a Medicaid participating facility.

Home and community-based services and/or alternate services must be specified in a written individualized plan of care developed by a state designated case management agency. The plan must specify the type and frequency of services, the service providers and the cost of services.

The disregarded resource is subject to Medicaid estate recoveries under section 1917(b)(1)(c)(i) of the Act.

A transfer of the disregarded resource is not subject to evaluation under the transfer of assets provision of section 1917(a)(1) of the Act.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
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IDENTIFICATION OF GROUPS COVERED BY SECTION 1902(r)(2) POLICIES
AND STATUTORY/REGULATORY CITATIONS

<u>Coverage Group Description</u>	<u>Citation</u>	<u>1902(r)(2) Policy From Page 1</u>
1. Individuals who meet re- quirements more restrictive than SSI's.	42 CFR 435.121 and §1619(b)(3) of the Act, PL 99-643, §7	#1, 2 and 3
2. Qualified severely impaired blind or disabled individuals under 65, who, except for earnings, are eligible for SSI.	§1902(a)(10)(A)(i) (II) and §1905(q) of the Act, PL 99-509, §9404 and §1619(b) (8) of the Act, PL 99-643, §7	#1, 2 and 3
3. Blind or disabled individuals, 18 or older, who are ineligible for SSI due only to OASDI bene- fits.	§1634(c) of the Act, PL 99-643, §6	#1, 2 and 3
4. Individuals receiving mandatory State supplements.	42 CFR 435.130	#1 and 2
5. Blind and disabled individuals who meet all Medicaid require- ments except current blindness or disability criteria, and have been continuously eligible since 12/73 under the State's 12/73 requirements.	42 CFR 435.133	#1, 2 and 3

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<u>Coverage Group Description</u>	<u>Citation</u>	<u>1902(r)(2) Policy From Page 1</u>
6. Individuals who received SSI/SSP but became ineligible after 4/77 due solely to a cost-of-living increase in OASDI benefits.	42 CFR 435.135	#1, 2 and 3
7. Disabled widows and widowers who would be SSI eligible except for increase in OASDI benefits, caused by PL 98-21, §134.	§1634 of the Act, PL 99-272, §12202	#1, 2 and 3
8. Disabled widows, disabled widowers, and disabled unmarried divorced spouses who had been married to the insured individual for at least ten years before the divorce became effective, who have attained the age of 50, who are receiving Title II benefits, and who because of the receipt of Title II income lost eligibility for SSI or SSP, who would still secure SSI or SSP if Title II was not counted as income, and who are not entitled to Part A under Title XVIII.	§1634(d) of the Act	#1, 2 and 3

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<u>Coverage Group Description</u>	<u>Citation</u>	<u>1902(r)(2) Policy From Page 1</u>
9. Qualified Medicare beneficiaries who are entitled to Medicare Part A, whose income does not exceed a specified percentage of the poverty level, and whose resources do not exceed twice the SSI standard.	§1902(a)(10)(E)(i) and §1905(p) of the Act, PL 100-203, §4118(p)(8), PL 100-360, §301(a) & (e), PL 100-485, §608(d)(14), PL 100-647, §8434	#1 and 2
10. Qualified Working Disabled individuals who are entitled to Medicare Part A.	§1902(a)(10)(E)(ii), §1905(s) and 1905(P)(3)(A)(i) of the Act.	#1 and 2
11. Specified Low Income Medicare Beneficiaries who are entitled to Medicare Part A, whose income does not exceed a specified percentage of the poverty level, and whose resources do not exceed twice the SSI standard.	§1902(a)(10)(E)(iii) and 1905(P)(3)(A)(ii) of the Act.	#1 and 2
12. Groups of individuals who receive a State Supplementary payment (but not SSI) based on need.	42 CFR 435.230 1902(a)(10)(A)(ii)(XI) of the Act.	#1 and 2
13. Medically Needy Aged	42 CFR 435.320 42 CFR 435.330	#1, 2 and 3

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<u>Coverage Group Description</u>	<u>Citation</u>	<u>1902(r)(2) Policy From Page 1</u>
14. Medically Needy Blind	42 CFR 435.322 42 CFR 435.330	#1, 2 and 3
15. Medically Needy Disabled	42 CFR 435.324 42 CFR 435.330	#1, 2 and 3
16. Blind and disabled individuals who meet all Medicaid requirements except current blindness or disability criteria, and have been continuously eligible since 12/73 under the State's 12/73 requirements.	42 CFR 435.340	#1, 2 and 3

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